PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10749399

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN SMALL ENTITY	
TOTAL CLAIMS			30					RATE	FEE	OR 7	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FE			BASIC FEE	
TOTAL CHARGEABLE CLAIMS			30mi	nus 20=	<u>~10</u>			X\$ 9=		1	X\$18=	180
INDEPENDENT CLAIMS			7 minus 3 = *						 	OR		100
Мι	JLTIPLE DEPE	NDENT CLAIM P						X43=	 	OR	X86=	·
								+145=		OR	+290=	
* If the difference in column 1 is less than zero, enter "0" in column 2							TOTAL	Ļ	OR	TOTAL	98.0	
	CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							SMALL	ENTITY	OR	OTHER SMALL	
Г		CLAIMS		HIGHE		1	lı		ADDI-] [4001
AMENDMENT A		REMAINING AFTER AMENDMENT		NUMB PREVIO PAID F	USLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***		=	Ì	X43=		OŘ	. X8e=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+145=		OR	+290=	
(19 (1)							L	TOTAL			TOTAL	
(Column 1) (Column 2) (Column 3)								ADDIT. FEE			ADDIT. FEE	
	(Column 1) (Column 2) (Column 3											
8		REMAINING	1	NUMB		PRESENT			ADDI-			ADDI-
N		AFTER		PREVIO		EXTRA		RATE	TIONAL		RATE	TIONAL
ME	-	AMENDMENT		PAID F	ОН		 -		FEE	1	<u> </u>	FEE
AMENDMENT	Total	*	Minus Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent FIRST PRESE	* NTATION OF MU	L	PENDENT (CLAIM			X43=		OR	X86=	
								+145=		OR	+290=	
								TOTAL DDIT. FEE		OR ,	TOTAL DDIT. FEE	`
		(Column 1)										
J C	`	CLAIMS	•	HIGHE	BER OUSLY		·F	I	ADDI-	Г		ADDI-
		REMAINING AFTER	,	NUMB! PREVIOL		PRESENT		RATE	TIONAL		RATE	TIONAL
밀		AMENDMENT		PAID FO		EXTRA			FEE			FEE
AMENDMENT	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	,
¥ .	Independent	*	Minus	***		=	ı	X43=			X86=	
٩_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						· ⊩	7402		OR	700-	
								+145=		OR	+290=	i
** If	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Numb r Previously Paid For" IN THIS SPACE is less than 20, enter "20."									OR ,	TOTAL	
***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ADDIT. FEE												
'	ne ingrestivum	Del Fleviously Palo	iroi (lotalor	maepenaen	y is the l	ingriest number	TOUN	u in the app	ropriate box	ın colu	m n 1.	